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	CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE				OTHER T HAN			
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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR	+290= TOTAL		4	,	
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Application or Docket Numb er